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UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO.  
15-R-0002

CUSTOMER NO.  
266

FORM APPROVED  
OMB NO. 0579-0036

**ANNUAL REPORT OF RESEARCH FACILITY**  
(TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)

RHODE ISLAND HOSPITAL  
MIDDLE HOUSE 4TH AND 5TH  
PROVIDENCE, RI 02903

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

FACILITY LOCATIONS/sites)

CENTRAL RESEARCH, MIDDLEHOUSE BLG.  
PROVIDENCE, RI 02903

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS FORM 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report)	F. TOTAL NO. OF ANIMALS  (Cols. C + D + E)
4. Dogs					
5. Cats			10		10
6. Guinea Pigs					
7. Hamsters					
8. Rabbits			248		248
9. Non-Human Primates					
10. Sheep					
11. Pigs			93		93
12. Other Farm Animals					
13. Other Animals					

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all the exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

**CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL**  
(Chief Executive Officer or Legally Responsible Institutional official)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

11/16/2007

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 15-R-0003  
CUSTOMER NUMBER: 267

FORM APPROVED  
OMB NO. 0579-0036

**ANNUAL REPORT OF RESEARCH FACILITY**  
(TYPE OR PRINT)

Brown University  
34 Olive St., Box G-F287  
Providence, RI 02912

Telephone: (401) -863-3223

**3. REPORTING FACILITY** (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

FACILITY LOCATIONS (Site) - See Attached Listing

**REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY** (Attach additional sheets if necessary or use APHIS Form 7023A)

A. Animals Covered by The Animal Welfare Regulations	B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reason such drugs were not used must be attached to this report)	F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)
4. Dogs	0	0	0	0	0
5. Cats	0	0	2	0	2
6. Guinea Pigs	0	0	20	0	20
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	13	0	13
9. Non-human Primates	0	6	25	0	31
10. Sheep	0	0	1	0	1
11. Pigs	0	0	64	0	64
12. Other Farm Animals	0	0	0	0	0
13. Other Animals	0	0	0	0	0
Goats	0	0	12	0	12
Bats	5	41	0	0	41
Ferrets	0	0	6	0	6

**ASSURANCE STATEMENTS**

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
(Chief Executive Officer or Legally Responsible Institutional Official)

(X)

[Redacted Signature Area]

DATE SIGNED  
11/19/07

*ACR*



BROWN

DIVISION OF BIOLOGY AND MEDICINE

STATEMENT OF EXCEPTIONS TO USDA REGULATION FILED  
WITH 1 DECEMBER 2007 ANNUAL REPORT OF BROWN UNIVERSITY

REGISTRATION # 15-R-0003

Brown University has several IACUC approved protocol exceptions to USDA regulation in which access to water is regulated for 24 non-human primates used in behavioral studies of cognitive, visual and motor function. IACUC approved written guidelines for monitoring the health and well being of each non-human primate are followed by investigators and overseen by the veterinary staff.

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO. 15-R-0004  
CUSTOMER NO. 268

FORM APPROVED  
OMB NO. 0579-0036

## ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)

UNIVERSITY OF RHODE ISLAND  
GREEN HALL  
KINGSTON, RI 02881  
(401) 874-4410

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

### FACILITY LOCATIONS (sites)

See Attached Listing

(CLAF)

(1) Central Laboratory Animal Facility (2) Peckham Farm (3) Morrill Hall  
(4) Biological Sciences Bldg. (5) Fogarty Hall (College of pharmacy)

### REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS FORM 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report)	F. TOTAL NO. OF ANIMALS  (Cols. C + D + E)
4. Dogs					
5. Cats					
6. Guinea Pigs	17	27	14		41
7. Hamsters	35	33	102		135
8. Rabbits	3	35	26		61
9. Non-Human Primates					
10. Sheep		19	38		57
11. Pigs		39	5		44
12. Other Farm Animals					
Donkey	2				
Cows		38			38
Other Animals					
Opossum		5			5
Peromyscus Leucopus 71		157	48		205

### ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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### CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional official)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143)

OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

12-19-07

FORM APPROVED  
OMB NO. 0579-0036

UNIVERSITY OF RHODE ISLAND  
GREEN HALL  
KINGSTON, RI 02881  
(401) 874-4410

[illegible]

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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DATE SIGNED

12-19-07

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO.  
15-R-0010

CUSTOMER NO.  
261

FORM APPROVED  
OMB NO. 0579-0036

**ANNUAL REPORT OF RESEARCH FACILITY**  
(TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)

RHODE ISLAND COLLEGE  
600 MT. PLEASANT AVE; OFFICE OF RSCH & GRANT  
ADM  
PROVIDENCE, RI 02908

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

**FACILITY LOCATIONS(sites)**

PROVIDENCE, RI 02908

**REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS FORM 7023A)**



A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report)	F. TOTAL NO. OF ANIMALS  (Cols. C + D + E)
4. Dogs					
5. Cats					
6. Guinea Pigs					
7. Hamsters					
8. Rabbits					
9. Non-Human Primates					
10. Sheep					
11. Pigs					
12. Other Farm Animals					
13. Other Animals					

**ASSURANCE STATEMENTS**

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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**CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL**  
(Chief Executive Officer or Legally Responsible Institutional official)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL	NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)	DATE SIGNED
		10/02/2007

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 15-R-0014  
CUSTOMER NUMBER: 272

FORM APPROVED  
OMB NO. 0579-0036

**ANNUAL REPORT OF RESEARCH FACILITY**  
( TYPE OR PRINT )

Ethide Laboratories, Inc.  
91 Hill Farm Road  
Coventry, RI 02816

Telephone: (401) -397-5602

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Attached Listing

**REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A )**

A.  Animals Covered By The Animal Welfare Regulations	B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. ( An explanation of the procedures producing pain or distress in these animals and the reas such drugs were not used must be attached to this report	F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E )
4. Dogs					
5. Cats					
6. Guinea Pigs					
7. Hamsters					
8. Rabbits	0				
9. Non-human Primates					
10. Sheep					
11. Pigs					
12. Other Farm Animals					
13 Other Animals					

**ASSURANCE STATEMENTS**

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  
( Chief Executive Officer or Legally Responsible Institutional Official )

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

11-30-07

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

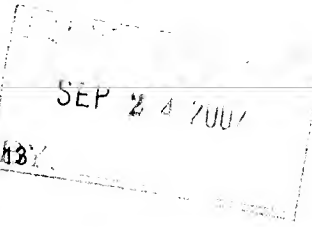
1. CERTIFICATE NUMBER: 15-R-0020  
CUSTOMER NUMBER: 33144

FORM APPROVED  
OMB NO. 0579-0036

**ANNUAL REPORT OF RESEARCH FACILITY**  
(TYPE OR PRINT)

Vero Science LLC  
1334 Main Road  
Iverson, RI 02878

Telephone: (617) -966-8413



3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

**REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)**

A. Animals Covered By The Animal Welfare Regulations	B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquiliz- ing drugs would have adversely affected the procedures, res- ults or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reason such drugs were not used must be attached to this report)	F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)
4. Dogs	N/A				
5. Cats	N/A				
6. Guinea Pigs	N/A				
7. Hamsters	174	0	112	0	112
8. Rabbits	N/A				
9. Non-human Primates	N/A				
10. Sheep	N/A				
11. Pigs	N/A				
12. Other Farm Animals	N/A				
13. Other Animals	N/A				

**ASSURANCE STATEMENTS**

- Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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**CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL**  
(Chief Executive Officer or Legally Responsible Institutional Official)

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

9/19/07

which is obsolete.)



UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO.  
15-V-0001

CUSTOMER NO.  
679

FORM APPROVED  
OMB NO. 0579-0036

## ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)

VA MEDICAL CENTER (650)  
830 CHALKSTONE AVENUE  
PROVIDENCE, RI 02908

KL

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

### FACILITY LOCATIONS/sites

VA MEDICAL CENTER (650)  
PROVIDENCE, RI 02908

### REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS FORM 7023A)

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4. Dogs					
5. Cats					
6. Guinea Pigs					
7. Hamsters					
8. Rabbits					
9. Non-Human Primates					
10. Sheep					
11. Pigs					
12. Other Farm Animals					
13. Other Animals					
MICE	316		112		112
RATS	10		154		154

### ASSURANCE STATEMENTS

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SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

10/02/2007